

INSTRUCTIONS FOR COMPLETING DMR SUPPLEMENTAL REPORTS

DAILY EFFLUENT MONITORING REPORT

Use this form to report daily monitoring results for the parameters that must be monitored in effluent for compliance with the permit. Results for influent parameters should be reported on Form 3800-FM-WSFR0436.

1. Enter Facility Name, Municipality, County, Watershed No., Laboratories, Month, Year, NPDES Permit No., Outfall No., and Permit Expiration Date (it is noted that this information may be pre-populated if you have received this form with your permit). For Laboratories, list the names of all laboratories where samples were analyzed during the month, including on-site analysis.
2. In the column headers, below "Effluent Parameters," enter the names of parameters in the permit. Since limited space is provided, abbreviation may be necessary. If there are more parameters for an outfall than columns provided on the form, attach an additional sheet.
3. Below parameter names, and to the right of "Q" (Qualifier) column headers, enter the units associated each parameter (it is noted that this information may be pre-populated if you have received this form with your permit).
4. Enter monitoring results for parameters in the rows corresponding to the day of the month in which samples were collected. Enter results exactly as reported by the laboratory, or if measured with on-site equipment, to the level of precision recommended by the equipment manufacturer. Enter data qualifiers such as "<," ">," "J," and others in the "Q" column.
5. Calculate and report average values at the bottom of the table in accordance with the DMR Instructions (3800-FM-WSFR0463). Note – for bacteria, calculate and report the geometric mean value.
6. Type the name of the person who prepared the form, the person's job title, and sign and date the form after reading the certification statement.

INFLUENT AND PROCESS CONTROL REPORT

1. Enter Facility Name, Municipality, County, Watershed No., Month, Year, NPDES Permit No., and Permit Expiration Date.
2. For **Influent**, enter daily average Influent Flow (MGD) (if an influent flow meter is in use), daily influent BOD₅ concentrations (mg/l) and loads (lbs), and daily influent TSS concentrations (mg/l) and loads (lbs). If an influent flow meter is not in use, you may use results from an effluent flow meter.
3. For **Process Control**, enter daily average Mixed Liquor Suspended Solids (MLSS) (mg/l) and daily average Aeration Dissolved Oxygen (DO) for aerobic biological treatment systems, and total daily Sludge Wasted (removed from biological treatment), in gallons, for all treatment system types. If a parameter does not apply to your facility, leave the column blank. Information for other parameters such as Return Activated Sludge (RAS) Rate, Recirculation Rate (for fixed media treatment systems), Sludge Blanket Thickness, Sludge Volume Index, and others may be requested by the DEP office that issued the permit.
4. Type the name of the person who prepared the form, the person's job title, and sign and date the form after reading the certification statement.

HAULED IN MUNICIPAL WASTES REPORT

This form is intended for documenting the receipt of municipal wastes including sewage sludge, septage and other wastewaters hauled in from other facilities for processing and/or disposal at your facility. This form should not be used for reporting receipt of residual wastes (e.g., food processing wastes, oil and gas wastewater, landfill leachate, etc.) - please use Form 3800-FM-WSFR0450 for reporting this information.

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1. Enter Facility Name, Municipality, County, Watershed No., Month, Year, NPDES Permit No., and Permit Expiration Date.
2. For septage, biosolids and other wastewaters (specify type in the space provided), record the daily volume received in gallons, the daily BOD₅ concentration (average), the daily BOD₅ load in lbs (average), and the disposal location. For disposal location, specify the plant location or tank receiving hauled in wastes (e.g., headworks, primarily clarifier, digester, etc.).
3. Determine daily BOD₅ concentrations in mg/l by sampling loads in accordance with the permit or otherwise as determined by the facility. Periodic sampling of loads is encouraged to improve confidence in reported results.
4. Calculate the average, daily total and monthly total values and report the values in the spaces provided.
5. Type the name of the person who prepared the form, the person's job title, and sign and date the form after reading the certification statement.

BIOSOLIDS PRODUCTION AND DISPOSAL FORM

1. Enter Facility Name, Municipality, County, Watershed No., Month, Year, NPDES Permit No., and Permit Expiration Date.

Biosolids Production Information

2. For each off-site removal event for liquid sewage sludge or biosolids and for dewatered sewage sludge or biosolids, and for each event where dewatered sewage sludge or biosolids are incinerated on-site, list the date of the event, identify the gallons (liquid) or tons (dewatered) removed or incinerated and the percent solids (e.g., 10%, 20%, etc.) Report only sewage sludge or biosolids that have been removed from the plant digesters and other solids which have been **permanently** removed from the treatment process. Do **not** include sewage sludge or biosolids from other facilities that are processed at your facility. (If there were no off-site removal events during the month, check the box above the table).

Calculate dry tons for liquid sewage sludge or biosolids by multiplying the volume (gallons) by the percent solids and by a conversion factor of 0.0000417. For example, if 2,500 gallons of liquid biosolids is removed, and the percent solids is 3.0%, dry tons is calculated as:

$$2,500 \text{ gallons} \times 3.0\% \times 0.0000417 = 0.31 \text{ dry tons}$$

Calculate dry tons for dewatered sewage sludge or biosolids by multiplying the tons dewatered by the percent solids and by a conversion factor of 0.01. For example, if 5 tons of dewatered biosolids is removed, and the percent solids is 50%, dry tons is calculated as:

$$5 \text{ tons} \times 50\% \times 0.01 = 2.5 \text{ dry tons}$$

The **% Solids** of liquid or dewatered sewage sludge or biosolids must be determined periodically through laboratory testing. Do not estimate or guess this value. An acceptable test method is method 2540B in *Standard Methods for the Examination of Water and Wastewater*, 18th edition, where samples are dried at 103-105°C. Other references such as ASTM may have equivalent tests which are also acceptable.

Biosolids and Incinerator Ash Disposal and Beneficial Use Information

3. Report sewage sludge, biosolids, and ash disposal and beneficial use information by disposal/application site. There are columns for four possible sites per month - if more sites are needed, attach additional pages. For each Site Name, listed at the top of the column, enter the Municipality and County of the site, the DEP Permit No. (i.e., Biosolids

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permit number for land application, landfill waste management permit number, etc.), Type of Material (sewage sludge, biosolids, or incinerator ash), Dry Tons Applied/Disposed at the site for the month, Type of Disposal/Use (e.g., reed beds, agricultural utilization, composting, landfill, other treatment plant, etc.) and the name of the hauler (company or individual name).

4. Type the name of the person who prepared the form, the person's job title, and sign and date the form after reading the certification statement.

NON-COMPLIANCE REPORTING FORM

Use this supplemental form to report all permit violations and any other non-compliance that may endanger health or the environment, in accordance with your permit. Complete all sections that apply. If you are reporting violations of permit limits, monitoring requirements or schedules that do not pose an immediate threat to health or the environment, you may attach this form to the Discharge Monitoring Report (DMR). If you are reporting other non-compliance events, and the deadline for a written report (e.g., 5 days) does not coincide with your submission of the DMR, this form should be submitted separately to the Department by the reporting deadline set forth in the permit.

If you are unsure of whether an incident constitutes non-compliance that may endanger health or the environment, it is recommended that you notify the Department verbally as soon as possible after you become aware of the incident. Title 25, Pa. Code §§ 91.33 and 91.34 (regarding incidents causing or threatening pollution and activities utilizing pollutants, respectively), in part requires immediate notification by telephone to the Department of pollution incidents, remediation, and may require an additional report on the incident or plan of pollution prevention measures.

Instructions:

1. Enter the name of the facility, the municipality and county where it is located, the month and year when violations occurred, and the NPDES or WQM permit number for the facility.
2. If there were violations of permit effluent limitations during the month, check the box next to "Violations of Permit Effluent Limitations." (Note – if using the electronic version of this form, check the boxes first, and then select Tools – Unprotect Document to enter additional information). Enter the date of the violation (if a violation of a minimum or maximum limit, the date of sample collection, or if a violation of an average limit, the end of the monitoring period), the parameter name, the permit limit and units, the statistical code (e.g., "MIN", "MAX", "MO AVG", etc.), the measured result and units, the cause of the violation and the corrective action taken. **If there are more than two violations during the monitoring period and/or if the space provided is insufficient to explain the cause or corrective action, please attach additional pages.**
3. If there are Sanitary Sewer Overflow (SSO) discharges or other unauthorized discharges from the facility (e.g., spills, leaks, etc.) that enter or have the potential to enter waters of the Commonwealth, including groundwater, notify DEP by phone as soon as possible, and document the discharge on this form by checking the box next to "Sanitary Sewer Overflows and Other Unauthorized Discharges." Record the event (discharge) date, the substance discharged (e.g., sewage, on-site chemicals, etc.), the location where the discharge occurred (e.g., manhole number, pump station name, equipment description, etc.), the volume discharged (gallons), the approximate duration of the discharge (hours), the receiving waters (name of stream or groundwater), the impact on the receiving waters, if observed (e.g., solids deposition, foam, fish kill, etc.), the cause of the discharge, and the date on which the Department was verbally notified. **If there are more than two discharge events during the monitoring period and/or if the space provided is insufficient to explain the discharge, please attach additional pages.**
4. If there are other violations of the permit, check the box next to "Other Permit Violations," and check the appropriate box that describes the violation type. If not identified on the form, check the box next to "Other" and provide a written explanation. **If the space provided is insufficient to explain the violation, please attach additional pages.**
5. Type your name and title and sign and date the form after reading the certification statement.

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If you have questions about completing this form, contact the Water Management Operations Section of the Department in your region:

Southeast Region – (484) 250-5970
Northeast Region – (570) 826-2553
Southcentral Region – (717) 705-4707

Northcentral Region – (570) 327-3661
Southwest Region – (412) 442-4000
Northwest Region – (814) 332-6942

NUTRIENT MONITORING REPORT

Use this form to report daily monitoring results and monthly calculations for Total Phosphorus and the Nitrogen series, where such monitoring is required by the permit.

1. Enter Facility Name, Municipality, County, Watershed No., Month, Year, NPDES Permit No., Outfall No., and Permit Expiration Date.
2. Enter daily monitoring data for Flow (MGD) and Nutrient parameter concentrations (mg/l) and loading (lbs/day). Concentrations for Total Nitrogen are computed by summing the concentrations for TKN and $\text{NO}_2 + \text{NO}_3$ as N. Calculate loading by multiplying Flow by concentration and by the conversion factor 8.34. If no monitoring data are available for the day, leave the row blank. If you receive a "non-detect" (i.e., < "reporting limit") result, enter the result as reported by the laboratory, but use one-half the reporting limit for calculating the loading (lbs/day).
3. At the bottom of the table, calculate average monthly concentrations, loadings and total monthly loads.
4. Type the name of the person who prepared the form, the person's job title, and sign and date the form after reading the certification statement.

NITROGEN AND PHOSPHORUS NUTRIENT BUDGET REPORTS

Use these forms to report Nitrogen and Phosphorus credit transactions and offsets applied during a month, and monthly Nitrogen and Phosphorus loads. **If no credits are sold or applied and there are no offsets to report for a month, these forms should not be submitted.**

1. Enter Facility Name, Municipality, County, Watershed No., Month, Year, NPDES Permit No., Outfall No., the number of Nitrogen and Phosphorus credits purchased during the month (lbs), Total Nitrogen (TN) and Total Phosphorus (TP) Delivery Ratios for the facility, and Permit Expiration Date. (If you receive this form with your permit, this information should be pre-populated).
2. Use the tables "Total Nitrogen - Pounds" and "Total Phosphorus – Pounds" to report all credits that you wish to apply for permit compliance and all credits sold. You do not need to apply credits that you purchased during the month toward permit compliance, but if you choose to do so, report the number you wish to apply in this table. Any remaining credits that you purchase can be applied another month or during the Truing Period (Oct 1 - Nov 28). List the registry number, contract effective date and DEP approval date for all credits applied or sold during the month. Divide the Credits Applied and Credits Sold by the TN and TP Delivery Ratios for your facility.
3. Use the tables "Total Nitrogen - Offsets" and "Total Phosphorus – Offsets" to report all offsets for the month. For septage (only septage, not holding tank or other hauled in wastes), divide the total gallons of septage received by 1,000 and multiply by 3 to determine the total amount (lbs) of offsets to report in the Total Nitrogen - Offsets table. For all other offsets, list the source, approved amount and DEP approval date.
4. Report the Monthly Total and Monthly Net Nitrogen Loads (lbs) and Monthly Total and Monthly Net Phosphorus Loads (lbs) below the respective tables.

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5. Type the name of the person who prepared the form, the person's job title, and sign and date the form after reading the certification statement.

ANNUAL NUTRIENT SUMMARY REPORT

Use this form to document annual loads where the permit requires monitoring and reporting of annual loads for Total Phosphorus and Total Nitrogen.

1. Enter Facility Name, Municipality, County, Watershed No., Compliance Year (e.g., 10/1/09 to 9/30/10), NPDES Permit No., Outfall No., the Total Nitrogen (TN) and Total Phosphorus (TP) credits purchased during the year, the Delivery Ratios for the facility for TN and TP, and Permit Expiration Date. (If you receive this form with your permit, this information should be pre-populated).
2. For each month, enter the Monthly Total Mass Loads (Actual Loads Discharged), Credits Sold / Delivery Ratios for TN and TP, Credits Applied / Delivery Ratios for TN and TP, Offsets, and Monthly Net Mass Loads, as reported on Monthly Nitrogen and Phosphorus Budget worksheets submitted throughout the year. Credits Sold / Delivery Ratios and Credits Applied / Delivery Ratios recorded in the table for TN and TP should match the values recorded on the Monthly Nitrogen Budget and Monthly Phosphorus Budget Forms (3800-FM-WSFR0445 and 3800-FM-WSFR0446, respectively).
3. If there were credits sold or purchased during the Truing Period (Oct 1 - Nov 28), divide the amount of credits sold or purchased by the Delivery Ratios for the facility and report these values in the columns next to "Truing Period Adjustments." Complete Nitrogen and Phosphorus Budget worksheets to report the registry numbers, contract effective dates, amounts, and DEP approval dates for all credits purchased or sold during the Truing Period, and include these forms with your submission. The Annual Net Mass Loads are to be used for permit compliance (if a limit is in your permit).
4. Type the name of the person who prepared the form, the person's job title, and sign and date the form after reading the certification statement.

HAULED IN RESIDUAL WASTES REPORT

Use this form to document receipt of residual wastes at your treatment facility (e.g., food processing waste, landfill leachate, oil and gas wastewaters). Municipal wastes such as sewage sludge and septage should be documented on the Hauled in Municipal Wastes Supplemental Report (3800-FM-WSFR0437).

1. Enter Facility Name, Municipality, County, Watershed No., Month, Year, NPDES Permit No., and Permit Expiration Date.
2. Enter the date for each day in which the facility receives residual wastes. If wastewater is received from more than one generator on the same day, repeat the date in a separate row.
3. Report the total volume received each day from each generator (source), in whole gallons.
4. Report the license plate number of the vehicle hauling the wastewater to the treatment facility. If more than one vehicle is used by a generator, report the date and total volume hauled by each vehicle daily (use separate rows as necessary).
5. For oil and gas wastewaters, enter the permit number of the well from which the wastewater was generated. For other wastewaters, this column may remain blank.
6. Report the source of each load of residual waste, including the generator name, address, and state. For oil and gas wastewaters, report the location of the well(s) generating the wastewater.

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7. Enter Wastewater Type, typically frac water, drilling fluids or production water for oil and gas wastewaters, or other types such as food processing waste or leachate.
8. If the wastewater has been analyzed and reported on a Residual Waste Form 26R, or a separate waste characterization using the parameters from Form 26R, enter "Yes" under the column "Chemical Analysis", otherwise enter "No".
9. Type the name of the person who prepared the form, the person's job title, and sign and date the form after reading the certification statement.